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FEE TRANSMITTAL for FY 2003			Complete If Known						
			Application Number			09/259,619			
			Filing Date			March 1, 1999			
			First Named Inventor			Timothy LaBadie et al.			
Patent fees are subject to annual revision.			Examiner Name			Jeff Rossi			
Applicant claims small entity status. See 37 CFR 1.27			Group Art Unit			2176			
TOTAL AMOUNT OF PAYMENT (\$) 460.00			Attorney Docket No.			210655.90018			
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)							
Check Credit card Money Other None	ADDITIONAL FEES								
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Deposit		Fee Fee Fee Code (\$)			F	Fee Description Fee I			
Account 17-0055	105		2050	65	Surcharge - I	ate filing fee or	oath		
Deposit Account Quartes & Brady LLP	10	2 50	2052	25		ate provisional	filing fee or		
Name The Commissioner is authorized to: (check all that apply)		3 130	4050	***	cover sheet				
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Charge any additional fee(s) during the pendency of this application	180		1804	920*		sublication of S	e <i>rte</i> reexamination IR prior to		
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1002 330 2002 165 Design filing fee	1	i5 1,9 6 0		980		r reply within fit	th month		
1003 510 2003 255 Plant filing fee	140			160	Notice of Ap	pear in support of a	a annoal		
1004 740 2004 370 Reissue filing fee 1005 160 2005 80 Provisional filing fee	1	3 280		140	Request for		Торрост		
'		51 1,510		1,510	•	-	use proceeding		
SUBTOTAL (1) (\$) 0.00			2452	55	Petition to re	on to revive - unavoidable			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		53 1,280		840		vive - unintenti	onai		
Extra Claims below Fee Paid Total Claims -20** = X = 0.00	150 150	01 1.280 02 460		640 230	Design issue	issue fee (or reissue)			
Independent 3*** # X 1-0.00	15		1	310	Plant issue for				
Claims Multiple Dependent	144			130	Petitions to t	he Commission	ier		
	18	7 50	1807	50	Processing f	ee under 37 Cf	R 1.17(q)		
Large Entity Small Entity Fee Fee Fee Fee Fee Description	181	06 180	1806	180	Submission	of Information I	Disclosure Stmt		
Code (\$) Code (\$) 1202 18 2202 9 Claims in excess of 20	80:	21 40	8021	40		sch patent assi os number of p			
1201 84 2201 42 Independent claims in excess of 3	184	9 740	2809	370		nission after fin			
1203 280 2203 140 Multiple dependent claim, if not paid					(37 ČFR § 1.	.129(a))	_		
1204 84 2204 42 "Reissue independent claims over original patent	18	10 740	2810	370	For each ad examined (3	ditional invention of CFR § 1.129	n to be		
1205 18 2205 9 ** Reissue claims in excess of 20	18)1 74	2801	370	Request for	Continued Exa	mination (RCE)		
and over original patent			02 500 1802 000 Request for expedited examination						
SUBTOTAL (2) (\$) 0.00	Oth	Other fee (specify)							
**or number previously paid, if greater; For Reissues, see above	.۾.	Reduced by Sasic Filing Fee Paid SUBTOTAL (3) (\$) 460.00							
or number previously part, it greater. Polytonssues, see above									
SUBMITTED BY Complete (# applicable) Name (Partition No. 104 000 Telephone 144 000									
Name (PrintType) Keith M. Baxter ((Attorney)A				1,233	Telaphoi	414.277.5		
Signature	_					Date	October 1	<u>↓, 2002</u>	

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